

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	Yes
Computer Readable Form (CRF)?::	Yes
Title::	COMPOSITIONS, KITS, AND METHODS FOR IDENTIFICATION, ASSESSMENT, PREVENTION, AND THERAPY OF CERVICAL CANCER
Attorney Docket Number::	MRI-062
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	2
Total Drawing Sheets::	2
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	John
Middle Name::	E.
Family Name::	Monahan
City of Residence::	Walpole
State or Province of Residence::	MA
Country of Residence::	US

Street of mailing address:: 942 West Street  
City of mailing address:: Walpole  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02081

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Xumei  
Family Name:: Zhao  
City of Residence:: Wayland  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 149 Concord Road  
City of mailing address:: Wayland  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 01778

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: China  
Status:: Full Capacity  
Given Name:: Yan  
Family Name:: Chen  
City of Residence:: Cambridge  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 26A Plymouth Street, Apt. 2  
City of mailing address:: Cambridge  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02141

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Karen  
Family Name:: Glatt  
City of Residence:: Natick  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 17 Beacon Street  
City of mailing address:: Natick  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 01760

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: India  
Status:: Full Capacity  
Given Name:: Shubhangi  
Family Name:: Kamatkar  
City of Residence:: Newton  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 655 Saw Mill Brook Parkway, #1  
City of mailing address:: Newton  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02459

#### **Correspondence Information**

Correspondence Customer Number:: 00959

#### **Representative Information**

Representative Customer Number:: 00959

#### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/404770	08/20/02